FRATERNAL SOCIETIES

COMPANY NAME:	NAIC Company Code:			
Contact:	Telephone:			

	QUIRED FILINGS IN THE STATE OF: Utah		Filings Made During the Year 2009					
(1) (2)		(3)		(4) BER OF CO	PIES*	(5)	(6) FORM	(7)
Check- list	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	Domestic		Foreign	DUE DATE	SOURCE**	APPLICABLE NOTES
		I NIAIC EINIANGIAI CEATEMENTO	State	NAIC	State			
	1	I. NAIC FINANCIAL STATEMENTS Annual Statement (8 ½"x14")	2	EO	xxx	3/1	NAIC	See Notes
	1	Amuai Statement (8 /2 X14)	2	LO	ллл	3/1	NAIC	E,F&L
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	See Note M
	3	Separate Accounts Annual Statement (8 ½"x 14")	2	EO	XXX	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	2	EO	XXX	4/1	NAIC	
	11	Actuarial Certification Related Annuity Nonforfeiture Compliance Actuarial Opinion on X-Factors	2 2	EO EO	XXX	3/1 3/1	Company	
	13	Actuarial Opinion on A-Factors Actuarial Opinion on Separate Accounts Funding	2	EO	xxx xxx	3/1	Company Company	
	14	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	XXX	3/1	Company	+
	15	Interest Sensitive Life Insurance Products Report	2	EO	XXX	4/1	NAIC	
	16	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	
	17	Long Term Care Experience Reporting Forms	2	EO	XXX	4/1	NAIC	
	18	Management Discussion & Analysis	2	EO	XXX	4/1	Company	
-	19	Medicare Supplement Insurance Experience Exhibit	2	EO	XXX	3/1	NAIC	
	20	Medicare Part D Coverage Supplement	2	EO	XXX	3/1 ,5/15, 8/15, 11/15	NAIC	
	21	Reasonableness of Assumptions Certification	2	EO	XXX	5/15, 8/15, 11/15	Company	
	22	Reasonableness & Consistency of Assumptions Cert.	2	EO	XXX	5/15, 8/15, 11/15	Company	
	23	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method	2	EO	XXX	5/15, 8/15, 11/15	Company	
	24	Reasonableness & Consistency of Assumptions Cert. (Updated Average Market Value)	2	EO	XXX	5/15, 8/15, 11/15	Company	
	25	Reasonableness & Consistency of Assumptions Cert. (Updated Market Value)	2	EO	XXX	5/15, 8/15, 11/15	Company	
	26	Risk-Based Capital report	2	EO	XXX	3/1	NAIC	
	27	RBC Certification required under C-3 Phase I	2	EO	XXX	3/1	Company	
	28	RBC Certification required under C-3 Phase II	2	EO	XXX	3/1	Company	
	29 30	Statement of Actuarial Opinion Statement on non-guaranteed elements-exhibit 5 Interr. #3	2	EO EO	XXX	3/1 3/1	Company	+
	31	Statement on Participating/Non-participating Policies-exhibit 5,	2	EO	xxx xxx	3/1	Company	
	0.1	Inter. #1	_	20	70.01	5/1		
	32	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	
	33	Trusteed Surplus Statement	2	EO	XXX	3/1 ,5/15, 8/15, 11/15	NAIC	
	10	III. ELECTRONIC FILING REQUIREMENTS				2/1	NA TO	
	40	Annual Statement Electronic Filing March .PDF Filing	XXX	1	XXX	3/1 3/1	NAIC NAIC	+
	42	Separate Accounts Electronic Filing	xxx xxx	1	xxx xxx	3/1	NAIC	
	43	Separate Accounts Electronic Fining Separate Accounts .PDF Filing	XXX	1	XXX	3/1	NAIC	+
	44	Supplemental Electronic Filing	XXX	1	XXX	4/1	NAIC	
	45	Supplemental .PDF Filing	XXX	1	XXX	4/1	NAIC	
	46	Quarterly Statement Electronic Filing	XXX	1	XXX	5/15, 8/15 & 11/15	NAIC	
	47	Quarterly .PDF Filing	XXX	1	XXX	5/15, 8/15 & 11/15		
	48	June .PDF Filing	XXX	1	XXX	6/1	NAIC	
	61	IV. AUDITED FINANCIAL STATEMENTS	2	NT/ A	NT/A		Commons	+
	61	Accountants Letter of Qualifications Audited Financial Statements	2 2	N/A EO	N/A xxx	6/1	Company Company	
	63	Audited Financial Statements Audited Financial Statements Exemption Affidavit	0	N/A	N/A	0/1	Company	
	64	Independent CPA	0	N/A	N/A		Company	
		Notification of Adverse Financial Condition	2	N/A	N/A		Company	
	65		2	N/A	N/A		Company	
	65	Report of Significant Deficiencies in Internal Controls	_					
		Request for Exemption to File	1	N/A	N/A		Company	
	66	1 5		N/A	N/A		Company	
	66	Request for Exemption to File		N/A 0	N/A	3/31	Company State	
	66 67	Request for Exemption to File V. STATE REQUIRED FILINGS	1			3/31 1/31		See Note O
	66 67 101	Request for Exemption to File V. STATE REQUIRED FILINGS Premium tax	1	0	1		State	See Note O See Note L

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	
	Financial Statements	Dan Applegarth (801)538-9509 dapplegarth@utah.gov
В	Mailing Address:	Utah Insurance Department State Office Building, RM 3110 Salt Lake City, Utah 84114-6901
С	Mailing Address for Filing Fees:	Same as above
D	Mailing Address for Premium Tax Payments:	K. Ray Hammond (801)297-3540 khammond@utah.gov Utah State Tax Commission 210North 1950West Salt Lake City, Utah 84134
Е	Delivery Instructions:	All hardcopy filings must be postmarked no later than the indicated due date. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day.
F	Late Filings:	Foreign company electronic filings will be deemed filed based on the date received by the NAIC. Domestic hardcopy filings will be deemed filed based on the postmark date.
G	Original Signatures:	Required for domestic companies.
Н	Signature/Notarization/Certification:	Required for domestic companies.
I	Amended Filings:	To be submitted with cover letter and jurat page signed by top two officers.
J	Exceptions from normal filings: Extensions and/or exemptions do apply to premium tax and fees	Requests for extensions for a period of 30 days or less beyond the regular due date or exemptions, from filing the annual statement only, will not be required providing the domiciliary state has granted the extension or exemption and

K	Bar Codes (State or NAIC)	notified the NAIC. Extensions beyond 30 days will require written request for extension prior to expiration of the initial 30 day period, and domiciliary approval. Not Required.
L	Signed Jurat	Domestics-Original Signature, Notarization/Certification required.
M	Quarterly Financial Statements	Domestics must file two printed statements.
N	Utah Accident & Health Survey	All insurers who have accident & health business in Utah are required to file this survey (see website for more).
0	State Filing Fees	See the fee Schedule Shown in Utah Administrative Code R590- 102-5

General Instructions For Companies to Use Checklist

Please Note:

This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send mailing labels and other information to all companies but will not be sending their own checklist this year.

<u>Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC.</u> Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The Annual Statement Electronic Filing includes the annual statement data and all supplements due March 1, per the Annual Statement Instructions. This includes all detail investments schedules and other supplements for which the Annual Statement Instructions exempt printed detail.

The *March .PDF Filing* is .pdf files for annual statement data, detail for investment schedules and supplements due March 1.

The Separate Accounts Electronic Filing includes the separate accounts annual statement and investment schedule detail.

The Separate Accounts .PDF Filing is the .pdf file for the separate accounts annual statement and investment schedule detail.

The Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The *Supplemental .PDF Filing* is the .pdf file for all supplements due April 1.

The *Quarterly Electronic Filing* includes the quarterly statement data.

The *Quarterly .PDF Filing* is the .pdf for quarterly statement data.

The *June .PDF Filing* is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (E) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally, on its website). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.